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		`	(E)				<del></del>	(Depositor's name)		
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				<u> </u>				(Date)		
APPLICATION NO.	FILING DATE		I	FIRST NAMED INVENTOR		АТТОІ	RNEY DOCKET NO.	CONFIRMATION NO.		
09/545,034 04/06/2000 TITLE OF INVENTION: CUSTOM STORES				Eduardo Cue	03/8	20/209	P2512/560 9 AMONDAF2 03303	9025 301 095450 <b>3</b> 4		
						C:152 C:830		1510.00 <b>O</b> P 33.03 <b>O</b> P		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DU	Æ T	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510		\$0	\$0	•	\$1510	03/19/2009		
EXAM	INER	ART UNIT	ART UNIT CLASS-SUBCLAS		]					
ZURITA,.	JAMES H	3625		705-026000	•					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A										
PLEASE NOTE: Unl recordation as set fort	ess an assignee is ident h in 37 CFR 3.11. Com	ified below, no ass pletion of this form	signee o	data will appear on the p	atent. If an assigr assignment.	nee is id	lentified below, the de	ocument has been filed for		
(A) NAME OF ASSIGNEE				(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
APPLE INC.				Cupertino, CA						
Please check the appropr	iate assignee category of	r categories (will no	ot be pri	nted on the patent):	Individual 🛱 C	orporati	on or other private gro	oup entity Government		
4a. The following fee(s) are submitted:    Issue Fee   Publication Fee (No small entity discount permitted)     Advance Order - # of Copies			4b	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 024800 (enclose an extra copy of this form).						
	s SMALL ENTITY state	us. See 37 CFR 1.2		b. Applicant is no lon						
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be a ates Patent and Trad	ccepted demark	from anyone other than t Office.	he applicant; a reg	istered a	attorney or agent; or th	e assignee or other party in		
Authorized Signature	Jams Ja	Z			Date <u>Ma</u> 1	ch ]	19, 2009			
Typed or printed name James A. LaBarre				Registration No. 28,632						
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 (tiality is governed by 35 d application form to thoose for reducing this but/irginia 22313-1450.	CFR 1.311. The info 5 U.S.C. 122 and 37 c USPTO. Time wi orden, should be sen O NOT SEND FEE	ormatio 7 CFR ill vary nt to the S OR C	n is required to obtain or 1.14. This collection is es depending upon the indic Chief Information Offic COMPLETED FORMS TO			lic which is to file (and is to complete, including to on the amount of times of the complete, U.S. Deptor TO: Commissioner	by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,		

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INSTRUCTIONS: This form should be used for

maintenance fee notific	ations.	therwise in Block 1, by	(a) specifying a new corn	espondence address	nired). Blocks 1 through 5 will be mailed to the current; and/or (b) indicating a se	r correspondence address a parate "FEE ADDRESS" fo			
21839	DENCE ADDRESS (Note: Use F	3lock 1 for any change of address	OIPE Pa	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, much as each of the certificate of mailing or transmission.					
POST OFFICE	, INGERSOLL & BOX 1404 A, VA 22313-1404	PATER	add trai	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
		4	MOBNARA			(Depositor's name)			
			-			(Signature)			
APPLICATION NO.	FILING DATE	<del>- ,</del>	CIDOTALA AND DE LOS			(Date)			
09/545,034			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.			
TITLE OF INVENTION			Eduardo Cue		P2512/560	9025			
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	nonprovisional NO		\$0	\$0	\$1510	03/19/2009			
EXAM	EXAMINER		CLASS-SUBCLASS						
ZURITA,		3625	705-026000	•					
"Fee Address" indi	Ondence address (or Char	age of Correspondence	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively.  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is						
Number is required.			listed, no name will be	neys or agents. If no printed.	o name is 3				
PLEASE NOTE: Unit	anc an anaismus is ide. w		THE PATENT (print or typ		····				
recordation as set forth (A) NAME OF ASSIC		etion of this form is NO	J		e is identified below, the do	cument has been filed for			
APPLE INC.	INEE		(B) RESIDENCE: (CITY	and STATE OR CO	DUNTRY)				
			Cupertino, (						
Please check the appropri	ate assignee category or o	ategories (will not be pri	inted on the patent):	Individual 🖫 Con	poration or other private grou	p entity Government			
4a. The following fee(s) and Issue Fee Publication Fee (No Advance Order - #	re submitted:  o small entity discount pe of Copies 10	4b	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 024800 (enclose an extra copy of this form).						
5. Change in Entity State  a. Applicant claims	is (from status indicated SMALL ENTITY status	above)	_						
NOTE: The Issue Fee and interest as shown by the re	Dalliant's E #C .		from anyone other than the Office.	e applicant; a registe	ENTITY status. See 37 CFI ered attorney or agent; or the	assignee or other party in			
Authorized Signature _	Jamy Ja	h.		Date Marc	h 19, 2009				
Typed or printed name	James A. La	Barre		Registration No.	28 632				
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